PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001  Application or Docket Number  10/676722  CCK -0071												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL E		OR	OTHER SMALL	
TOTAL CLAIMS			w				F	ME	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BA	BASIC FEE 370.00		OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			70 minus 20=		· E		7	<b>(\$ 9=</b>		OR	X\$18=	
INDEPENDENT CLAIMS			<b>₹</b> minus 3 =		· d		X42=				X84=	
MULTIPLE DEPENDENT CLAIM PR			RESENT						<b>}</b>	OR	- 10 /	
* If the difference in column 1 is less than zero, enter						olumn 2		140=		OR	+280=	3.
	G	A PA PMIA I	MENDED	L DAD	T II	Column 3)  SMALL ENTITY  OR TOTAL  OTHER THAN  SMALL ENTITY  OR SMALL ENTITY  PRESENT EXTRA  PRATE TIONAL FEE  X\$ 9=  OR X\$18=  Q1.00						
_		CLAIMS										
ENT A		REMAINING AFTER AMENOMENT		NUM	BER OUSLY		F	ATE	TIONAL		RATE	TIONAL
AMENDMENT	Total	.25	Minus	- 2	0	.5	>	(\$ 9=		OR	X\$18=	91.00
AME	Independent	• 5	Minus	440	<u>8</u>		>	<b>(42=</b>		OR	X84=	
	FIRST PRESE	NTATION OF M	OR +280=									
								TOTAL		25	TOTAL	
	1/6/04	(Column 1)		(Colu	mn 2)	(Column 3)	ADE	NT. FEE		<b>J</b>	ADOIT, FEE	gen
	<u></u>	CLAIMS REMAINING AFTER AMENDMENT	<u>.</u> .			PRESENT EXTRA	۶	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	.25	Minus	-2	5	. –	×	\$ 9=		OR	X\$18=	
	Independent	* 3 NTATION OF MI	Minus		3		>	(42=		OR	X84=	•
	rins i Prese	NTATION OF MI	JUINCE DEF	ENUEN	CLAIM		+	140=		OR	+280=	
							<u> </u>	TOTAL		OR	YOTAL ADDIT, FEE	
<u>م</u>	/22/0	S(Column 1)		(Colu	mn 2)	(Column 3)	700	ii. FEE		,	NOUII. PEET	
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVR PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE
Š	Total	-20	Minus	-2	5	-	x	\$ 9=		OR	X\$18=	J 3-4-
NE.	Independent	· 3	Minus	<b></b> 3		G.	<b>—</b>	42=			X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F	72-		OR	A545	
+140= OR +280=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."												
	if the "Highest Nu	mber Previously Pa	aid For IN THE	S.SPACE i	is less than	a 3. enter "3."	ADD	T. FEE			TOTAL ODIT. FEE	
1	The "Highest Nurr	ther Previously Pai	d For" (Total or	Independ	ent) is the	highest number	found is	n the app	ropriste bax	in cot	umo 1.	
FORM	PTO-075 (Rev. 6/	01)					Petent A	vi Trade	ade Office 11	C OFF	ADTMENT OF	201111222

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